Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	PATE	Application of Docket Number										
		OR	OTHER THAN SMALL ENTITY									
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA							RATE	FEE		RATE	FEE	
BASIC FI (37 CFR								\$	OR		\$	
TOTAL C			minus 20 = •				x \$=		OR	× \$=		
INDEPEN (37 CFR	NDENT CLAIMS 1.16(b))	3	minus 3	= •					OR	x \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$=		OR	+ \$=		
If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II												
\neg	CLAIMS AS AWENDED - FART II (Column 2) (Column 3)							ENTITY	OR	OTHER THAN SMALL ENTITY		
NT À		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
W (37	Total 7 CFR 1.16(c))	. 6	Minus	<u>" </u>	=		x \$=		OR	x \$=		
AMENDMENT	dependent 7 CFR 1.16(b))	• (Minus	" 3	= /		x \$=		OR	x \$=		
¥ Fii	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=		
1						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)				-				
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
W (37	Total 7 CFR 1.16(c))	•	Minus	**	=		x s=		OR	x \$=		
AMENDMENT	dependent 7 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=		
A FI	RST PRESENTA	TION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF		+ \$=		OR	+ \$=	: :		
	· ·						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)				1		,	
NTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total 7 CFR 1.16(c))	•	Minus	••	=		× \$=		OR	x \$ =		
	dependent 7 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=		
Į ¥ _{FI}	IRST PRESENTA	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF		+ \$=		OR	+ \$=			
				: "		-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999														
	CLAIMS AS FILED - PART I (Column 1) (Column 2)										ENTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATE I		FEE	1	RATE	FEE
BASIC FEE			a.								345.00	OR		690.00
TOTAL CLAIMS				minus 2	•	X			_		OR	X\$18≃		
INC	EPENDENT CL	AIMS	2 minus 3 = *						X39=			OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130			OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2										L		OR	TOTAL	(20Y)
	CLAIMS AS AMENDED - PART II										•	1011	OTHER	THAN
(Column 1) (Column 2) (Column 3)									SMAL	L E	NTITY	OR	SMALL	ENTITY
ENT A	4	REM	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	111	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		e	Minus	ک.	} 0	= .	$ \cdot $	X\$ 9:	-		OR	-X\$18=	
	Independent	•		Minus	***		=		X39=			OR	X78=	
<u> </u>	FIRST PRESE	NTATIO	ON OF MI	JLTIPLE DEF	PEN	DENT CLAIM		۱ <u>۱</u>	+130			OR	+260=/	
,										AL			TOTAL ADDIT, FEE	
	,	(Col	umn 1)		(0	Column 2)	(Column 3)	. ,	NDDIT. F	EE I			ADDII. PEE	
AMENDMENT B		REM	AIMS IAINING FTER NDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	:	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• (5	Minus .	**	20	=		X\$ 9=	-		OR	X\$18=	
	Independent	•	<u>)</u>	Minus	***	<u> </u>	5		X39=			OR	X78,=	
_	FIRST PRESE	MININ	JN OF MI	JEHFLE DEF	CINL	CENT CEAIM		' [+130=	-		OR	+260=	
								A	TOT DDIT. FI			OR	TOTAL ADDIT. FEE	
			umn 1)			Column 2)	(Column 3)							
AMENDMENT C		REM Al	AIMS IAINING FTER NDMENT		Pf	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• ()	Minus	**	20	=		X\$ 9=			OR	X\$18≃	
	Independent	• (チ	Minus	***		=	lt	X39=			OR	X78=	
<u> </u>	FIRST PRESE	NTATIO	ON OF MI	JLTIPLE DEF	PENI	DENT CLAIM		۱ 	.400	┪			.260-	-
١.,	f the entry in colu	mn 4 ic:	lace than th	ne entry in colu	mr 2	write "0" atinw	tumn 3.	L	+130=			OR	+260=	
**	If the "Highest Nu	mber Pr	eviously Pa	aid For IN THI	S SP/ c cp	ACE is less tha ACE is loss tha	n 20, enter "20. n 3. enter "3."		TOT. DOIT. F	EL			ADDIT. FEE	·
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														